

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		6	10-27-00
FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 -+ ..... Restricted

N ..... Non-prosecuted  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

BEST AVAILABLE COPY

Claim	Date
Final	1/1/04
Original	8/1/04
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18	✓ ✓
19	✓ ✓
20	✓ ✓
21	✓ ✓
22	✓ ✓
23	✓ ✓
24	✓ ✓
25	✓ 0
26	✓ ✓
27	✓ ✓
28	✓ ✓
29	✓ ✓
30	✓ 0
31	✓ ✓
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33	✓ 0
34	✓ 0
35	✓ ✓
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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